

CPM SECTION 4200

EXHIBIT G

| | | | |
|---|--|---------------|--------------------|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>): STATE OF CALIFORNIA FRANCHISE TAX BOARD PO BOX 2952 G-10 SACRAMENTO, CA 95812-2952 | | TELEPHONE NO: | FOR COURT USE ONLY |
| ATTORNEY FOR (<i>Name</i>): SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: LOS ANGELES SUPERIOR COURT CLERK - PROBATE MAILING ADDRESS: 111 NORTH HILLS ST ROOM 112 CITY AND ZIP CODE: LOS ANGELES CA 90012 BRANCH NAME: | | | |
| ESTATE OF (NAME); DECEDENT | | | |
| REQUEST FOR SPECIAL NOTICE | | CASE NUMBER: | |

To the personal representative:

1. I am a person interested in the estate of (*name*):

2. I REQUEST SPECIAL NOTICE of (*complete only a or b*)

a. ☐ the following matters (*specify*):

b. ☐ The following matters (*check applicable boxes*):

- (1) ☒ all the matters listed in Probate code section 1250(c) (*do not check boxes (2)-(8).*)
- (2) ☐ inventories and appraisals of property, including supplements
- (3) ☐ accountings by the personal representative
- (4) ☐ reports of the status of administration
- (5) ☐ objections to an appraisal
- (6) ☐ petitions for the sale of property
- (7) ☐ Spousal Property Petition (Probate Code, § 13650)
- (8) ☐ other petitions: ☐ all petitions ☐ the following petitions (*specify*):

3. SEND THE NOTICES TO

a. ☐ meet the following address (*specify*): STATE OF CALIFORNIA FRANCHISE TAX BOARD
PO BOX 2952 G-10
SACRAMENTO, CA 95812-2952

B. ☐ my attorney at the following address (*specify*):

Date:

.....
(TYPE OR PRINT NAME)



(SIGNATURE)

☐ Attorney for person requesting special notice (*client's name*):

(Continued on reverse)